

EMPLOYEE NAME AND NO.

2. REPORTING UNIT

3. PAY ROLL PERIOD

4. TOUR OF

REMARKS:

6. Approved For Release 2002/03/20 : CIA-RDP57-00384R000500120005-1											PRESENT							
IN	OUT	A Y	R/T	N/D	O/T	H/T	C/T	OTHER	OUT	IN	A Y	A/L	S/L	C/T	LWOP	AWOL	OTHER	INITIALS
		S									S							
		M	8								M							
		T	8								T							
		W	8								W							
		T	8								T							
		F	8								F							
		S									S							
		S									S							
		M	8								M							
		T	8								T							
		W	8								W							
		T	8								T							
		F	8								F							
		S									S							

O. PAY PERIOD TOTALS

KEY: R/T-REGULAR TIME O/T-OVERTIME H/T-HOLIDAY TIME S/L-SICK LEAVE AWOL-ABSENT WITH-
 N/D-NIGHT DIFFERENTIAL C/T COMPENSATORY TIME A/L-ANNUAL LEAVE LWOP-LEAVE WITHOUT PAY OUT LEAVE

CERTIFY THAT THIS ABSENCE WAS DUE TO ILLNESS WHICH INCAPACITATED ME FROM DUTY.

CERTIFIED CORRECT

TELEPHONE

1. PAY ROLL CHANGE DATA

A. GRADE	B. SALARY		C. TAX CODE	D. ALLOTT. NO.		E. CHANGE SLIP NO.					
	BASE PAY	OVERTIME	OTHER	GROSS	TAX	RET.	BONDS	F.I.C.A.	S & Q	OTHER	NET PAY
1. PREVIOUS NORMAL											
2. NEW NORMAL											
3. PAY THIS PERIOD											

PROMOTION PERIODIC STEP INCREASE PAY ADJUSTMENT OTHER INCREASE

J. EFFECTIVE DATE	K. NEW SALARY RATE	L. REMARKS	M. AUDITED BY
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TIME AND ATTENDANCE REPORT AND PAY ROLL CHANGE SLIP

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